

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

03/06/01



Secret No. A-68614-1/RMS/RMK

84
Discarded Classification of this Application:

Class:

Subclass:

Application

Examiner:

Art Unit:

Box PATENT APPLICATION

Box PATENT APPLICATION
Assistant Commissioner for Patents
Washington, DC 20231

Sir:

This is a request for filing an

- ☐ Original
☐ Continuation
☐ Divisional
☒ Continuation-in-part

X Continuation-in-part
application under 37 C.F.R. 1.53(b), in the name of

Todd Kinsella (Mountain View, California)
(Names of ALL Applicants)

IN VIVO PRODUCTION OF CYCLIC PEPTIDES
(Title of Invention)

for _____ (Title of Invention)
 — continuation — divisional ☒ continuation-in-part
 This application was filed on March 6, 2000.

This is a continuation of application Serial No. 60/187,130, filed on March 6, 2000.

1. (a) — Enclosed is a new application.
(b) X Enclosed is a continuation-in-part application.
(c) — Enclosed is a copy of the prior application.
2. (a) — Enclosed is a new Declaration.
(b) — Enclosed is a copy of the prior Declaration as originally filed.
3. (a) X Applicant claims Small Entity status under 37 CFR 1.27.
(b) — A Small Entity Affidavit is of record in the prior application.
4. — The filing fee is calculated below:
Claims as filed in the prior application, less any claims canceled by amendment below:
- SMALL ENTITY**

Claims as filed in the prior application, less any claims canceled by amendment		SMALL ENTITY		OTHER THAN SMALL ENTITY	
(Col. 1) NO. FILED	(Col. 2) NO. EXTRA	RATE	FEE	RATE	FEE
			\$355		\$710
BASIC FEE		× 9 =	\$	× 18 =	\$
TOTAL CLAIMS	- 20 =	× 40 =	\$	× 80 =	\$
INDEP CLAIMS	- 3 =		\$	+270 =	\$
MULTIPLE DEPENDENT CLAIM PRESENTED <input type="checkbox"/> yes <input type="checkbox"/> no		+135 =	\$		\$
TOTAL			\$	TOTAL	\$

If the difference in Col 1 is less than zero, enter "0" in Col. 2

EXPRESS MAIL MAILING LABEL
 NUMBER **EL821722495US**
 DATE OF DEPOSIT **March 8, 2001**
 HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED
 WITH THE UNITED STATES POSTAL SERVICE EXPRESS MAIL POST
 OFFICE ADDRESSEE SERVICE UNDER 39 CFR 1.10 ON THE DATE
 INDICATED ABOVE AND IS ADDRESSED TO: ASSISTANT
 COMMISSIONER FOR PATENTS, WASHINGTON, DC 20231
Renee Koshak
 TYPED NAME
 SIGNED *Steve M. Asstak*

J1042 U.S. PTO
 09/800770

 03/06/01

5 - The Commissioner is hereby authorized to charge any additional fees which may be required, including extension fees, or credit any overpayment to Deposit Account No. 06-1300 (Order No. _____).

6 - Our check in the amount of \$ _____ is enclosed.
The filing fee is NOT being submitted with this transmittal letter.

7 - Cancel in this application original claims _____ of the prior application before calculating the filing fee. (At least one independent claim must be retained for filing purposes.)

8 - Amend the specification by inserting before the first line the sentence:
--This is a _____ continuation _____ divisional _____ continuation-in-part
of application Serial No. _____ filed _____--

9. (a) ☒ Informal drawings are enclosed (4 Sheets).
(b) ☐ Formal drawings are enclosed.

10. (a) ☐ Priority of application Serial No. 60/187,130, filed on March 6, 2000 in The United States of America is claimed under 35 U.S.C. 119/120.
(b) ☐ The certified copy has been filed in prior application Serial No. _____ filed on _____.

11. ☐ The prior application is assigned of record to _____

12. ☐ The power of attorney in the prior application is to:

Name: _____
Address: _____

- (a) ☐ The power appears in the original papers in the prior application.
(b) ☐ Since the power does not appear in the original papers, a copy of the power in the prior application is enclosed.
(c) ☐ A new power has been executed and is enclosed.
(d) ☐ Address all future communications to:

FLEHR HOHBACH TEST ALBRITTON & HERBERT LLP
Four Embarcadero Center - Suite 3400
San Francisco, California 94111-4187
Tel.: (415) 781-1989
Fax: (415) 398-3249

13. ☐ A preliminary amendment is enclosed. (Claims added by this amendment have been properly numbered consecutively beginning with the number next following the highest numbered original claim in the prior application.)

14. ☐ I hereby verify that the attached papers are a true duplicate of prior application Serial No. _____ as originally filed on _____.

Date: March 6, 2001

Signature: Robin M. Silva P47, 717, for
Robin M. Silva, Reg. No. 38,304

Address of Signer:

FLEHR HOHBACH TEST
ALBRITTON & HERBERT LLP
4 Embarcadero Center - Suite 3400
San Francisco, California 94111-4187
Tel.: (415) 781-1989
Fax: (415) 398-3249

____ Attorney or agent of record

☒ Filed under Section 1.34(a)